ASPIS (PTY) LTD

REGISTRATION NO: 2011/005416/07

MANUAL

in terms of

Section 51 of

The Promotion of Access to Information Act

2/2000

(the "ACT")

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1. Introduction to your company and the type of business:

1. INTRODUCTION

ASPIS (PTY) LTD is a insurance marketing company which was incorporated in 2007.

It was incorporated to market into the short term micro insurance space.

2. COMPANY CONTACT DETAILS

Directors: Mr P Bishop (Managing)

Mr J Crookes

Postal Address: P.O. Box 467, Kloof, 3620

Street Address: 45 Old Main Road, Kloof, 3610

Telephone Number: 031 818 0005

Email: paul@aspis.co.za

3. THE ACT

- **3.1** The ACT grants a requester access to records of a private body, if the record is required for the exercise or protection of any rights. If a public body lodges a request, the public body must be acting in the public interest.
- **3.2** Requests in terms of the ACT shall be made in accordance with the prescribed procedures, at the rates provided. The forms and tariff are dealt with in paragraphs 6 and 7 of the Act.
- **3.3** Requesters are referred to the Guide in terms of Section 10 which has been compiled by the South African Human Rights Commission, which will contain information for the purposes of exercising Constitutional Rights. The Guide is available from the SAHRC. The contact details of the Commission are:

Postal Address: Private Bag 2700, Houghton, 2041

Telephone Number: +27-11-877 3600 Fax Number: +27-11-403 0625 Website: www.sahrc.org.za

4. APPLICABLE LEGISLATION

| No | Ref | <u>Act</u> |
|----|----------------|---|
| 1 | No 71 of 2008 | Companies Act |
| 2 | No 68 of 2008 | Consumer Protection Act |
| 3 | No 58 of 1962 | Income Tax Act |
| 4 | No 66 of 1995 | Labour Relations Act |
| 5 | No 89 of 1991 | Value Added Tax Act |
| 6 | No 75 of 1997 | Basic Conditions of Employment Act |
| 7 | No 9 of 1999 | Skills Development Levies Act |
| 8 | No 25 of 2002 | Electronic Communications and Transactions Act |
| 9 | No 2 of 2000 | Promotion of Access of Information Act |
| 10 | No 30 of 1996 | Unemployment Insurance Act |
| 11 | No 130 of 1993 | Compensation for Occupational Injuries and Diseases Act |
| 12 | No 4 of 2013 | Protection of Personal Information Act |
| 13 | No 38 of 2001 | The Financial Intelligence Centre Act |

5. Schedule of Records

5.1 INTERNAL RECORDS

- · Documents of incorporation
- Memorandum and Articles of Association
- Minutes of Board of Directors meetings
- Records relating to the appointment of directors/ auditor/ secretary/public officer and other officers
- Share Register and other statutory registers
- Internal policies and Procedures
- Charters

The above records are available on request in terms of PAIA

5.2 FINANCIAL / OPERATIONAL RECORDS

- Annual Financial Statements
- Tax Returns
- Accounting Records
- Banking Records/Bank Statements
- · Electronic banking records
- Asset Register
- Invoices
- Service Level Agreements

The above records are available on request in terms of PAIA or limited information in our Annual Financial Statements

5.3 SARS RECORDS

- PAYE Records
- Documents issued to employees for income tax purposes
- Records of payments made to SARS on behalf of employees
- All other statutory compliances:
 - VAT

- Skills Development Levies
- UIF Workmen's Compensation

The above records are available on request in terms of PAIA

5.4 MARKETING

- Market Information and flyers
- Business model
- Performance Records
- Marketing Strategies
- Customer Database

The above records are available on request in terms of PAIA

6. FORM OF REQUEST

To facilitate the processing of your request, kindly:

- **6.1** Use the prescribed form, available on the website of the SOUTH AFRICAN HUMAN RIGHTS COMMISSION at www.sahrc.org.za.
- 6.2 Address your request to the Head of the Company (CEO).
- 6.3 Provide sufficient details to enable the COMPANY to identify:
 - (a) The record(s) requested;
 - (b) The requester (and if an agent is lodging the request, proof of capacity);
 - (c) The form of access required;
 - (d) (i) The postal address or fax number of the requester in the Republic;
 - (ii) If the requester wishes to be informed of the decision in any manner (in addition to written) the manner and particulars thereof;
 - (e) The right which the requester is seeking to exercise or protect with an explanation of the reason the record is required to exercise or protect the right.

7. PRESCRIBED FEES

The following applies to requests (other than personal requests):

- **7.1** A requestor is required to pay the prescribed fees (R50.00) before a request will be processed;
- **7.2** If the preparation of the record requested requires more than the prescribed hours (six), a deposit shall be paid (of not more than one third of the access fee which would be payable if the request were granted);
- **7.3** A requestor may lodge an application with a court against the tender/payment of the request fee and/or deposit;
- **7.4** Records may be withheld until the fees have been paid.
- 7.5 The fee structure and exemptions passed are available on the website of the SOUTH

AFRICAN HUMAN RIGHTS COMMISSION at www.sahrc.org.za.

| Please refer attached Form C for requests | |
|--|--------|
| Signed in Kloof on this day <u>7 March</u> | _ 2025 |
| Signature: | |
| Designation: Managing Director | |

FORM C

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY (Section 53(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)

[Regulation 10]

| Α. | Particulars | of pri | vate | body |
|----|-------------|--------|------|------|
|----|-------------|--------|------|------|

The Head:

B. Particulars of person requesting access to the record

- (a) The particulars of the person who requests access to the record must be given below.

 The address and/or fax number in the Republic to which the information is to be sent or
- (b) The address and/or fax number in the Republic to which the information is to be sent must be given.
- (c) Proof of the capacity in which the request is made, if applicable, must be attached.

| Full | names | and | surname |
|------|-------|-----|---------|
| | | | |

Identity number:

Postal address:

Fax number:

Telephone number:

E-mail address:

Capacity in which request is made, when made on behalf of another person:

C. Particulars of person on whose behalf request is made

This section must be completed ONLY if a request for information is made on behalf of another person.

Full names and surname:

Identity number:

D. Particulars of record

- (a) Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located.
- (b) If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.
- 1 Description of record or relevant part of the record:
- 2 Reference number, if available:
- 3 Any further particulars of record:

E. Fees

- (a) A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee has been paid.
- (b) You will be notified of the amount required to be paid as the request fee.
- (c) The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record.
- (d) If you qualify for exemption of the payment of any fee, please state the reason for exemption.

Reason for exemption from payment of fees:

F. Form of access to record

If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 hereunder, state your disability and indicate in which form the record is required.

Disability: Form in which record is required

Mark the appropriate box with an X.

Mark the appropriate box with an a

NOTES

- (a) Compliance with your request in the specified form may depend on the form in which the record is available.
- (b) Access in the form requested may be refused in certain circumstances. In such a case you will be informed if access will be granted in another form.
- (c) The fee payable for access for the record, if any, will be determined partly by the form in which access is requested.

| 1. If the record is in written or printed form: | | | | | | | | | | | | |
|---|---|---|------------------------------|----------------------|-----|----|--|--|--|--|--|--|
| | copy of record* | | inspection of record | inspection of record | | | | | | | | |
| 2. If record consists of visual images this includes photographs, slides, video recordings, computer-generated images, sketches, etc) | | | | | | | | | | | | |
| | view the images | the images copy of the images" transcription of the images* | | | | | | | | | | |
| 3. If record consists of recorded words or information which can be reproduced in sound: | | | | | | | | | | | | |
| | listen to the soundtrack audio cassette | transcription of soundtrack* written or printed document | | | | | | | | | | |
| 4. If re | cord is held on computer of | or in | an electronic or machine-rea | adable | for | m: | | | | | | |
| printed copy of record* printed copy of information derived from the record" copy in computer readable form* (stiffy or compact disc) | | | | | | | | | | | | |
| 'If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Postage is payable. YES NO | | | | | | | | | | | | |

G Particulars of right to be exercised or protected

| If the provided space | is inadequate, | please | continue | on a | separate | folio | and | attach | it to | this | form. | The | requester |
|-------------------------|----------------|--------|----------|------|----------|-------|-----|--------|-------|------|-------|-----|-----------|
| must sign all the addit | ional folios. | | | | | | | | | | | | |

- 1. Indicate which right is to be exercised or protected:
- 2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

H. Notice of decision regarding request for access

You will be notified in writing whether your request has been approved/denied. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.

| How would | l you prefer t | o be inf | ormed of | the c | decisio | n regarding | your | request | for a | access to | the record? |
|------------|----------------|----------|----------|-------|---------|-------------|------|---------|-------|-----------|-------------|
| Signed at. | | | . This | | day | of | | | 2 | 20 | |

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE